File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319



FOR INSTRUCTIONS SEE BACK OF FORM



Fax: 515-281-4073		SUMMARY PAGE	7	009 JAN 20 AM 10: 34
COMMITTEE NAME (Must be	e same as on Statement of Orga	enization)		
Rozinek	for Supervis	son	1 [FORM
IMPORTANT: Indicate by # type (1) Statewide/Legislative/Judge 8 (4) County Central Committee (5)	of committee you are reporting for. Standing for Retention Candidate (2	8	al C (DR-2 Rev. 07/2007) DISCLOSURE REPORT For Office Use Only Comm. # 157/
CANDIDATE COMMITTEES Candidate Name Rernitar D Office Sought Linn County Su	RozineK	Political Party (if applicable) Dem. District (if Senate or House)		cogged in Scanned Computer OM Audited
Late reports are subject to possil	ole civil and criminal penalties. Pu	rsuant to towa Code sections 68B.32	A(7) and 6	8A.401(3), the candidate, for a
SIGNATURE OF PERSON FIL	KONNUE INGREPORT	319-848-4598 TELEPHONE		01/18/09 DATE SIGNED
	lary 1943.	REPORT FOR (1) ELECTION		ELECTION YEAR.
CHECK IF AMENDMENT TO	D REPORT DATED		Local Con	mittees, enter Date of Election
	ation) report and attach Notice of o file reports until a DR-3 is filed.			Local Committees, enter County in cition is held
STATEM	ENT OF CASH ON HAND			
committee. This amo	ing of the reporting period. (To unt MUST be the same as the c eriod or must be zero if this is fir		\$	325.17
ADD TOTAL MONEY	TAKEN IN THIS PERIOD			
Schedule A: Cash Co	entributions total (Attach Schedu	ile A) (*also see in-kind below)		
Schedule F: Loans R	eceived total (Attach Schedule I	F)	***********	
Schedule H: Total Sa	iles of Campaign Property (Attac	ch Schedule H)	***************************************	
(Schedule H	applies to Candidates' Comm			200
		SUB-TOTAL	\$	325.17
-	MONEY SPENT THIS PERIOD	***		
	•	(**also see debts and loans below) e F)		
		ort balance must be zero)		325,17
UNPAID BILLS (From Sched	ule D - Attach Schedule D)	*************************************	\$	
		lule E)		
		e F)	•	1,000.00
CONSULTANT BREAKDOWN				YES V NO
CANDIDATE COMMITTEES C	NLY:			
VALUE OF CAMPAIGN PROP	ERTY (From Schedule H - Attac	ch Schedule H)	\$	-
STATE COMMITTEES: Subm	it a reconciled campaign accoun	et bank statement in January of eac	sh year.	·

OF	RINSTRUCTION	IS, SEE BACK OF FORM		SCHEDULE	
O		e(Must be same as on Statement of Organization) Sek for Supervisor		(Rev. 02/08) REC	DANS CEIVED EPAID
	'E: This schedu	te reports money loaned to the committee which is deposited in the committee	mittee account.	CHECK THIS	
		RY LOANS RECEIVED THIS REPORTING PERIOD			······
_	(Original	cource of loan, such as a bank, must be shown if a third party is involved.	Include loans from candid	late's personal funds.)	
	DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable	AMOUNT OF LOA	W
I				\$	
					4
l					
					_
1					
		7	OTAL (PART I)	s	
P.A		TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD corgiven must be reported on Schedule $E-$ in-kind Contributions.)	OTAL (PART I)	\$	-
P/	(Loans	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD forgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	OTAL (PART I) RELATIONSHIP TO CANDIDATE* (If Applicable	\$ AMOUNT REPAI	D
P	(Loens	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD forgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO		D
P	(Loans	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD forgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO)	D
P	(Loans	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD forgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO)	D
P	(Loans	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD forgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO)	D
	(Loans	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD forgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO)	D
	(Loans	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD forgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO)	D
	(Loans	ARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD orgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	D
	(Loans	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD forgiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER	RELATIONSHIP TO CANDIDATE* (if Applicable	\$	
	DATE PAID (MM/DD/YR)	TOTAL CASH REPAYMENTS MADE THIS REPORTING PERIOD Congiven must be reported on Schedule E - In-kind Contributions.) NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable candidate) (If Applicable ca	\$	